**Aims and objectives of this session**
This session is designed to optimise oncological outcomes.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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**Clinical and outcome characteristics of the cancer genome atlas (TCGA) bladder cancer cohort: Is it representative?**

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**Does associated CIS with MIBC impact on neoadjuvant chemotherapy? Results of an International consortium**


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Bladder-sparing protocol consisting of low-dose chemoradiotherapy and consolidative partial cystectomy against muscle-invasive bladder cancer: A comparison of oncological outcomes between primary and progressive diseases


Institutes: Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan

The B4GALT1 expression is prognostic and predictive for postoperative adjuvant chemotherapy benefit in patients with muscle-invasive bladder cancer


Institutes: Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China, Zhongshan Hospital, Fudan University, Dept. of Urology, Shanghai, China, School of Basic Medical Sciences, Fudan University, Biochemistry and Molecular Biology, Shanghai, China

Pattern of positive node metastases in patients treated with extended and super extended pelvic lymph node dissection and radical cystectomy due to bladder cancer


Institutes: IRCSS Ospedale San Raffaele, Dept. of Urology, Milan, Italy, Magna Graecia University of Catanzaro, Dept. of Urology, Catanzaro, Italy, Klinik Für Urologie, Luzerner Kantonsspital, Dept. of Urology, Lucerne, Switzerland, Medical University of Vienna, Dept. of Urology, Vienna, Austria

Circulating tumor cells do not correspond with clinicopathological characteristics of muscle-invasive bladder cancer patients undergoing radical cystectomy: Interim results of the CirGuidance study

By: Boormans J.L., De Kruijff I., Beije N., Kraan J., Te Slaa E., Wijburg C., Van Der Hoeven J., Van Der Heijden A., Somford R., Klaver D., Van N.M., Martens J.W., Sleijfer S.


Muscle invasive bladder cancer: A single sample patient assay to predict molecular subtypes and benefit of neoadjuvant chemotherapy


Institutes: Universitätsspital Bern, Universitätsklinik für Urologie, Bern, Switzerland, GenomeDx, Biosciences, Vancouver, Canada, Netherlands Cancer Institute, Dept. of Surgical Oncology, Division of Urology, Amsterdam, The Netherlands, University of Washington School of Medicine, Dept. of Urology, Seattle, United States of America, University Hospital of Southampton, Dept. of Urology, Hampshire, United Kingdom, Erasmus MC, University Medical Center Rotterdam, Dept. of Pathology, Rotterdam, The Netherlands, GenomeDx, Dept. of Biosciences, Vancouver, Canada, Department of Translational Medicine, Lund University, Division of Urological Research, Malmö, Sweden, University of North Carolina At Chapel Hill, Lineberger Comprehensive Cancer Center,
Preoperative double-J stenting increases the risk of upper urinary tract (UUT) recurrence after radical cystectomy
By: Kiss B.1, Furrer M.-A.1, Wuethrich P.2, Burkhard F.1, Thalmann G.1, Roth B.1
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Impact of perioperative transfusion of red blood cells and fresh frozen plasma on recurrence-free survival of patients after radical cystectomy for bladder cancer
Institutes: University Hospital of Tübingen, Dept. of Urology, Tübingen, Germany

Fate of patients undergoing pulmonary metastasectomy for metastatic urothelial carcinoma
By: Hoshi S.1, Fukui I.2, Kageyama Y.3, Kawashima K.4, Narita S.5, Ono K.6, Numahata K.1, Sato M.8, Morozumi K.8, Kuromoto A.8, Ozawa M.8, Hoshi K.7, Bilim V.7, Sasagawa I.7
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Characterization of genomic aberrations of circulating, cell-free DNA in bladder cancer patients treated with radical cystectomy using multiplex ligation-dependent probe amplification: A new and efficient profiling method
By: Soave A.1, Chun F.1, Rink M.1, Weisbach L.1, Maurer V.1, Gild P.1, Steinbach B.2, Fisch M.1, Pantel K.2, Schwarzenbach H.2
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Perioperative allogeneic blood transfusion does not adversely impact survival after radical cystectomy for urinary bladder cancer — a competing-risks analysis from a multi-institutional European series
By: Gild P.1, Vetterlein M.1, Kluth L.A.1, Gierth M.2, Fritsche H.-M.2, Burger M.2, Protzel C.3, Hakenberg O.3, Von Landenberg N.4, Roghmann F.4, Noldus J.4, Nuhn P.5, Rink M.1, Chun F.1, May M.6, Fisch M.1, Aziz A.1
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A propensity score analysis of radical cystectomy versus bladder-sparing trimodal therapy in the setting of a multidisciplinary bladder cancer clinic
By: Kulkarni G.1, Hermanns T.1, Wei Y.1, Bhindi B.1, Satkunasivam R.1, Athanasopoulos P.1, Bosstrom P.1, Kuk C.1, Li K.1, Templeton A.2, Srithar S.3, Van Der Kwast T.4, Chung P.5, Bristow R.3, Milosevic M.1, Warde P.5, Fleschner N.6, Jewett M.6, Bashir S.7, Zlotta A.8
Institutes: Princess Margaret Cancer Centre, University Health Network, Dept. of Surgery, Toronto, Canada, 2Mount Sinai Hospital, Dept. of Surgery, Toronto, Canada, 8Princess Margaret Cancer
908 Outcome of patients undergoing radical cystectomy for urothelial cell carcinoma of the bladder with evidence of distant metastases. Results of a single center study
Institutes: LMU-Klinikum der Universität München, Dept. of Urology, Munich, Germany

909 The accuracy of sequential urethral frozen sections and its impact on urethral recurrence after radical cystectomy
Institutes: University Hospital of Tübingen, Dept. of Urology, Tübingen, Germany